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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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In re application of: RAYMOND L. WHITE

Attorney Docket No.:  
EGCR-P030/ GC030US

Application No.: 10/092,672

Examiner: JASON M. SIMS

Filed: March 7, 2002

Group: 1631

Title: METHODS TO DETERMINE GENETIC  
RISK THROUGH ANALYSIS OF VERY LARGE  
FAMILIES

Confirmation No.: 3822

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### CERTIFICATE OF EFS-WEB TRANSMISSION

I hereby certify that this correspondence is being transmitted electronically through EFS-WEB to the Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450 on August 28, 2007.

Signed: \_\_\_\_\_/Tara Hayden/  
Tara Hayden

## AMENDMENT TRANSMITTAL

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

|  | Claims<br>After<br>Amendment |       | Highest<br>Previously<br>Paid For | Present<br>Extra | Small Entity<br>Rate Fee | Large Entity<br>Rate Fee |
|--|------------------------------|-------|-----------------------------------|------------------|--------------------------|--------------------------|
| Total Claims   | 08                           | MINUS | 10                                | 0                | x 25 =                   | x 50 =                   |
| Independent<br>Claims  | 02                           | MINUS | 03                                | 0                | x 100 =                  | x 200 =                  |
| Multiple Dependent Claim Present and Fee Not Previously Paid |                              |       |                                   |                  |                          |                          |
| Total  |                              |       |                                   |                  | \$                       | \$                       |

- ☒ Applicant(s) hereby petitions for a three month extension(s) of time to respond to the aforementioned Office Action.
- ☐ Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 500388.
- ☐ Enclosed is our Check No. \_\_\_\_\_ in the amount of \$ \_\_\_\_\_ to cover the additional claim fee and/or extension of time fees.
- ☒ Please charge the required fees, or any additional fees required to facilitate filing the enclosed response, to Deposit Account No. 500388 (Order No. \_\_\_\_\_).

Respectfully submitted,  
BEYER WEAVER LLP

/Tom Hunter/

Tom Hunter  
Reg. No. 38,498

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